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APPLICATION NO.	FILING DATE		FIRST NAMED INVE		ITOR	OR ATTORNEY I		RNEY DOCKET NO.	CONFIRMATION NO.	
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nonprovisional NO		\$1440		\$300		\$0		\$1740	09/15/2008	
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CFR 1.363).  Change of corresp Address form PTO/S)  "Fee Address" ind PTO/SB/47; Rev 03-(Number is required.  3. ASSIGNEE NAME A PLEASE NOTE: Un recordation as set forters.	or agents OR, alter (2) the name of a registered attorne 2 registered paten listed, no name w  FHE PATENT (print data will appear on T a substitute for filir	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  E PATENT (print or type)  ta will appear on the patent. If an assignee is identified below, the document has been filed for a substitute for filing an assignment.								
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a. Applicant clain	atus (from status indicate	us. See 37		☐ b. Applicant is n	io long	er claiming SMA	LL EN	TITY status. See 37 Cl	FR 1.27(g)(2).	
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